

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

TARGETED CASE MANAGEMENT SERVICES FOR PRE AND POST ADOPTION  
CHILDREN

**A. Target Group:** The person for whom Medicaid participates in the cost of case management services must:

1. Be Medicaid eligible;
2. Be a child whose parental rights have been terminated or for whom there is a permanency plan goal of termination of parental rights;
3. Be a child aged 0-18 who is or has been under the care, custody and control of the North Dakota Department of Human Services or other public agency or licensed child placing agency from another state where:
  - a. Parental rights have been terminated and the child has been placed into a pre-adoptive home, or
  - b. The adoption has been finalized and the child is considered a "special needs child" under state and federal definition, or
  - c. The child has been placed in North Dakota pursuant to the Interstate Compact for Children and placed by an appropriate agency from another state.

**B. Areas of State in which services will be provided:**

- ☒ Entire State.
- ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide.

**C. Comparability of Services**

- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

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**D. Definition of Services:**

Case Management Services is a combination of activities that assure that the eligible child has access to a full array of needed medical, education, vocational, social, treatment and rehabilitative services. A mechanism for referral will exist as an integral aspect of this service, as will a process for follow-up monitoring.

Case Management for pre and post adoptive children will enable these clients to have timely access to the services and programs that can best deal with their needs.

All providers must demonstrate the capacity to provide all core elements of case management services, including:

- 1) Crisis Intervention consists of the following:
  - a. Assesses the crisis situation and makes any necessary referrals to ensure that the child receives the most appropriate and cost-effective services from professional treatment providers.
  - b. Provides ongoing monitoring to ascertain likely and emerging crises of the recipient.
  - c. Advocates for the use of the least restrictive service available, and coordinate alternative arrangements where indicated and as available.
- 2) Functional Assessment consists of a written comprehensive assessment of a child's abilities, deficits, and needs must be conducted. Persons from relevant disciplines should be used to document service gaps and unmet needs. All services appropriate to the child's needs should be part of this activity.
- 3) Individual Treatment Plan Development consists of a plan that is specifically tailored to the needs of each child and includes specific goals, objectives, services to be provided, responsible persons, projected timeliness, and criterion for attainment. To the maximum extent possible, the development of an individual treatment plan is a collaborative process involving the child, the family or other support systems, the case management provider, and other service providers if applicable.

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- 4) Service Mobilization, Coordination, and Monitoring consists of developing a supportive relationship with the child that links the child to counseling, crisis intervention, problem solving and community living skills training that is provided by other professional treatment providers. Activities required to link the child to services specified in the plan are operationalized, and consultation is provided to providers and formal/informal support systems. Reviews are conducted to assure that the services continue to be appropriate, that the child is engaging in activities specified in the individual treatment plan, and that progress and satisfaction is evaluated by the child and significant others.

**E. Qualification of Providers**

In order to ensure that care is properly coordinated, targeted case management services need to be delivered by providers who have experience with adoptions and have accreditation with the Council on Accreditation.

Individual Case Managers serving this population must, at a minimum, hold a BSW and be supervised by a MSW (Masters Degree in Social Work). In addition, individual case managers must have completed course work in special needs adoption.

**F. The state assures that the provisions of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.**

- 1) Eligible recipients will have free choice of the providers of case management services.
- 2) Eligible recipients will have free choice of the providers of other medical care under the plan.

**G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.**

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